

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	NP		3-12-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	fa	720	05-21-01
RESPONSE FORMALITY REVIEW	LC	1024	11/15/01

# INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	
1	3/20/01
2	3/20/01
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Claim	Date
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If more than 150 claims or 10 actions  
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REX-5053  
11/15/01

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